<010>	Study Area Code	59126			 1 4
<015>	Study Area Name	Virgin Mobile USA LP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		1	
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data line <030>			·.,	
<810>	Reporting Carrier Virgin Mobile USA LP			Market and the second s	
<811>	Holding Company Sprint Corporation		,		
<812>	Operating Company		, i		

Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	359126	Assurance Wireless
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	m 481: Carrier Annual Reporting	FECForm/431 CMB/Control No3060-0986/O July 2013	
<010>	Study Area Code	369018	<u> </u>
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	913-762-6107	
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com	
ANNUA	LIREPORTING FOR ALL CARRIERS	Con Branch Con Residence State Con	Astib 53k92 oplation Completion outled Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	check box when complete)
<200> <210>	<u> </u>	(complete attached worksheet) no outages to report	
<300> <310> <320> <330>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	(attach descriptive document) (attach descriptive document)	
<400><410><420><430><450><	Number of Complaints per 1,000 customers (voice) Fixed Mobile Number of Complaints per 1,000 customers (broad) Fixed Mobile		
<710> <800> <900> <1000> <1010> <11100> <11100>	Service Quality Standards & Consumer Protection R 369018mn510 Functionality in Emergency Situations 369018mn510 Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	Rules Compliance (check to indicate certification) (attached descriptive document) (check to indicate certification) (attached descriptive document) (complete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (check to indicate certification) (attach descriptive document) (if not, check to indicate certification) (complete attached worksheet) (complete attached worksheet)	
<2000> <2005> <3000> <3005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Pri Rate of Return Carriers, Proceed to <u>ROR Additional</u>	ice Cap Local Exchange Carriers (check to indicate certification) (complete attached worksheet)	

Market Committee Control	rvice Quality Improvement Reporting		FCC Form 481
Data Co	llection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July2013 - ***
-010>	Shuth And Code 369018		
<010> <015>	Study Area Name Virgin Mobi	ile USA I.P	
<020>	Program Year 2014	ire oba Bi	
<030>		rew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030> 91	3-762-6107	
<039>	Contact Email Address - Email Address of person identified in data line <030> at		
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O	
	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	\cap	
<111>	year plan" filed with the FCC?	(yes / no) U	
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.		
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your cor CETC which only receives frozen support, your progress report is only required to address voice telephony service.	mpany is a	
	required to address voice telephony service.		
		Name of Attach	hed Document (.pdf)
	Please check these boxes below to confirm that the attached PDF, on line		
	112, contains a progress report on its five-year service quality improvement		
	plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.		
	center rever of census block as appropriate.		
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How (USF) was used to improve service quality		
<116>	How (USF)was used to improve service coverage		
<117>	How (USF) was used to improve service capacity		
<118>	Provide an explanation of network improvement targets not met		
	in the prior calendar year.		

(200) Service Outage Reporting (Voice)		C/Form 481 WB/Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form		y 2013

<010>	Study Area Code	369018	<u> </u>
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line	<030> 913-762-6107	
<039>	Contact Email Address - Email Address of person identified in data lin	e <030> andy.m.lancaster@sprint.com	

<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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						wo	rksheet		-			
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Data Col	ce Offerings including Voice Rate Data lection Form	en e	FGC Form 481 OVB Control (No., 3060-0986/OMB Cont July 2013	rollNo (3060-0819)
<010>	Study Area Code	369018		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com		
<701>	Residential Local Service Charge Effective Date 1/1/2013			
<702>	Single State-wide Residential Local Service Charge			

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
				-				

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				See att	ached worksheet			
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(710) Bro	adband Price Offerings	FCGForm481
	ection Form _{e.}	OMB.ControllNo. 3060-0986/OMB:ControllNo. 3060-0819
- 1		July 2013
<010>	Study Area Code	369018
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <	<030> 913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line	<030> andy.m.lancaster@sprint.com

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allow Action Taken Limit Reached
				ř				
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			e attached					
		work	sheet					
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202223640	erating Companies lection Form	And the second			PFGC-Form 481 - OMB (Control No. 3060) 0986 (OMB) (Control No. 3060-0819) July 2013
44.8 (44.8			<u> </u>		July 2013
<010>	Study Area Code		369018		
<015>	Study Area Name	·	Virgin Mobile USA	LP	
<020>	Program Year	<u> </u>	2014		
<030>		USAC should contact regarding this da		er	· · · · · · · · · · · · · · · · · · ·
<035>		nber - Number of person identified in d			
<039>	Contact Email Address -	Email Address of person identified in o	data line <030> andy.m.lancaste	er@sprint.com	
<810>	Reporting Carrier	Virgin Mobile USA LP			
<811>	Holding Company	Sprint Corporation			
<812>	Operating Company				
<813>		<a1></a1>		<a2> ,</a2>	e• <a3>;</a3>
		Affiliates		SAC	Doing Business As Company or Brand Designation
			See a	ttached works	heet
			See a	ttached works	heet
			See a	ttached works	heet
			See a	ttached works	heet
			See a	ttached works	heet
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			See a	ttached works	

Data Coll	oal Lands Reporting ection Form	FCC-Form 481 - OMB Gontrol No. 18060-0986 / OMB Control No. 18060-0819 901y 2013
<010>	Study Area Code	369018
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data lin	e <030> andy.m.lancaster@sprint.com
<910>	Tribal Land(s) on which ETC Serves	
•		
.020	Total Community Superior Obligation	
<920>	Tribal Government Engagement Obligation	Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	
		Select (Yes,No, NA)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	
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The state of the s	Terrestrial Backhaul Reporting.	FCC Form 481
Data Coll	ection Form	OMB Control No. 3060-0986/OMB Control No. 3060:0819
	44.	July 2013
<010>	Study Area Code	369018
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

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Commercial Solidaria de Caracia.	rmstand Condition for Life line Customers			FGC Form	481		
Lifeline Data Goll	ection/Form.			OMB Cont	iol No. 3060-0986	OMB Control No	3060-0819
Dataseon	ectionir of the						
<010>	Study Area Code	3	69018				
<015>	Study Area Name	1	/irgin Mobile USA LP				· · · · · · · · · · · · · · · · · · ·
<020>	Program Year		2014		· _2 : 4 : 4 : 4 : 4 : 4 : 4 : 4 : 4 : 4 :		
<030>	Contact Name - Person USAC should contact regarding this data		Andrew M. Lancaster				
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	913-762-6107				
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	andy.m.lancaster@sprint.	com			
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	_					
		Na	me of attached document	(.pdf)			
<1220>	Link to Public Website	HTTPh	ttp://www.assurancewireles	s.com/Public/Termsando	Conditions.aspx		
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:						
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	1					
<1222>	Details on the number of minutes provided as part of the plan,	V					
<1223>	Additional charges for toll calls, and rates for each such plan.	V		A TROUGH		y ^M aes	. pd

80.8.4530.00			
(2000) Pr	ice Cap Carrier Additional Documentation		FGCForm/481
Data Coll	ection Form		OMB Control No.: 3060-0986/OMB Control No.: 3060-0819
to their chester in	Rate-of-Return Carriers offiliated with Price Cap Local Exchange Carriers		July/2013
moluding	MOTEON TO THE CONTROL OF THE CONTROL		
<010>	Study Area Code 369		
<015>		gin Mobile USA LP	
<020>	Program Year 201		
<030>		ew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	
CHECK +H	ne boxes below to note compliance as a recipient of Incremental Connect Ameri	a Phase I support, frozen High Cost support. High Cost support to offset acce	ss charge reductions, and Connect America Phase II
CHECK		the information reported on this form and in the documents attached below	
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2010>	3rd Year Certification (47 CFR § 54.313(b)(2))		
\2011>	Statear certification (47 crit 3 34.323(b)(2))		L
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	••		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		·
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF, on line 2021,		
	contains the required information pursuant to § 54.313 (e)(3)(ii), as a re	sipient	
	of CAF Phase II support shall provide the number, names, and addresse.	of	
	community anchor institutions to which began providing access to broa		
	service in the preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	

IZNON E	ate Of Return Carrier Additional Documentation		FCC Form 481	
	ection Form		A COLOR OF LAND AND ADDRESS OF	0-0986/OMB/Control No. 3060-0819
ual us R	ection roum	The second secon	*July 2013	
OF SHARWAR	and the second s		CONTROL OF THE PROPERTY OF THE PARTY OF	
- <010>	Study Area Code 369018			
<015>	Study Area Name Virgin Mo	bile USA LP		
<020>	Program Year 2014 Contact Name - Person USAC should contact regarding this data And	rew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy,m.lancaster@sprint.com		
	he boxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that t		compliance with the finance	
	Progress Report on 5 Year Plan			
(3010)		Name of Attacked Danismont Linking Descriped Information		
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF, on line 3012,	Name of Attached Document Listing Required Information		
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.			
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313{f}(1){ii}) Is your company a Privately Held ROR Carrier (47 CFR § 54.313{f}(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313{f}(2) compliance requires:	Name of Attached Document Listing Required Information	(Yes/No) (Yes/No)	. C
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)			
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		البسلا	
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)	
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications			
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.			
(3022) (3023) (3024) (3025)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, Underlying information subjected to a review by an independent certified public accountant Underlying information subjected to an officer certification. PDF of Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information		
		- - · · · · · · · · · · · · · · · · · ·		

	tion - Reporting Carr lection Form	ier DMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	369018
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone N	lumber - Number of person identified in data line <030> 913 - 762 - 6107
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Virgin Mobile USA LP Signature of Authorized Officer: CERTIFIED ONLINE Date 10/10/2013 Printed name of Authorized Officer: Assistant Controller Title or position of Authorized Officer: 913 762 6107 Study Area Code of Reporting Carrier: 369018 Filing Due Date for this form: 10/15/2013 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. § 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	tion:- Agent / Carrier ection Form	FCC Form 481 9MB Control No. 13060-0986/0MB Control No. 3060-0819 101y/2013
		359018
<010>	Study Area Code	
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person L	JSAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone Num	ber - Number of person identified in data line <030> 913 - 762 - 6107
<039>	Contact Email Address - I	Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

l certify that (Name of Agent) also certify that I am an officer of the reporting carrier; n agent; and, to the best of my knowledge, the reports and	is authorized to submit the information reported on behalf of the r responsibilities include ensuring the accuracy of the annual data reporting requirements provided to data provided to the authorized agent is accurate.	
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date:	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Felephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	Authorized to File Annual Reports for CAF or LI Recipient	s on Benait of Reporting Carrier
	orized to submit the annual reports for universal service support rec eporting carrier; and, to the best of my knowledge, the information	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
signature of Authorized Agent or Employee of Agent:		Date:
rinted name of Authorized Agent or Employee of Agent:		
itle or position of Authorized Agent or Employee of Agent	. "	
elephone number of Authorized Agent or Employee of Age	ent:	
itudy Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

<010>	Study Area Code		369018	*	
<015>	Study Area Name		Virgin Mobile USA LP		
<020>	Program Year		2014		
<030>	Contact Name - Person U	SAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	913-762-6107		
<039>	Contact Email Address -	mail Address of person identified in data line <030	andy.m.lancaster@sprint.com		
<810>	Reporting Carrier	Virgin Mobile USA LP			
<811>	Holding Company	Sprint Corporation			
<812>	Operating Company				

	<a2>;</a2>	<66>
Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	369018	Assurance Wireless
<u></u>		
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	m 481 : Carrier Annual Reporting ollection Form		FCC Form 451 OMB Control No. 3060-1 July 2013	1985/OMB Control No. 3060;0819
<010>	Study Area Code	409025		
<015>	Study Area Name	Virgin Mobile USA LP	· · · · · · · · · · · · · · · · · · ·	
<020>	Program Year	2014	·	
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	913-762-6107		
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com	· · · · · · · · · · · · · · · · · · ·	
ĀŅŅŪĀ	LREPORTING FOR ALL CARRIERS			Sign Skills Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attach	ed worksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice)	(complete attach	ed worksheet)	
<310>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	(attach descript		
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed Mobile Number of Complaints per 1,000 customers (broad Fixed Mobile			
<510> <600> <610> <700> <710> <800> <1000> <1010> <1110> <1110> <1110>	Service Quality Standards & Consumer Protection 409025ar510 Functionality in Emergency Situations 409025ar610 Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	Rules Compliance (check to indicate (attached descript (check to indicate (attached descript (complete attach (complete attach (complete attach (if yes, complete attach (check to indicate (attach descript (if not, check to indicate (complete attach	ive document) e certification) ive document) ed worksheet) ed worksheet) ed worksheet) ed worksheet) e certification) ive document) e certification)	
<2000> <2005> <3000> <3005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Price Rate of Return Carriers, Proceed to <u>ROR Additional</u>	ce Cap Local Exchange Carriers (check to indicat (complete attach	ed worksheet) e certification)	
				Victoria de la compansión de la compansi

	rvice Quality Improvement Reporting llection Form	agent state of the	FCC Form/481 OMB Control No. 301 July 2013	50-0986/OMB Control Nov	3060-0819
<010>	Study Area Code	The state of the s			
<015>	Study Area Name Virgin Mobile USA LP	1 3 5 4 5 4 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5	under Sagel Baker, in		
<020>	Program Year 2014				
<030>	Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster				
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107		Ass. St. San		
<039>	Contact Email Address - Email Address of person identified in data line <030> andy .m. lancaster@s	sprint.com			
<110>	Has your company received its ETC certification from the FCC? (yes / no	,00			
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? (yes / no	00	B3		<u> </u>
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.				
		Name of Attach	ed Document (.pdf)		
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.				
<113>	Maps detailing progress towards meeting plan targets	7			27
<114>	Report how much universal service (USF) support was received	1			
<115>	How (USF) was used to improve service quality	7			
<116>	How (USF)was used to improve service coverage	1	Wife and the second		3
<117>	How (USF) was used to improve service capacity				4 4
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.				
			A A		8 A M. M. San

Collog	3060-0819
CO2D Program Year 2014 CO3D Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster CO3D Contact Telephone Number - Number of person identified in data line <030> 913-762-6107 CO3D Contact Email Address - Email Address of person identified in data line <030> andy m. lancaster wasprint.com CO3D NORS Reference Outage Start Outage Start Outage End Number of Customers Affected Number Date Time Date Time Customers Affected (Yes / No) All that apply) (Yes / No) Resolution REDACTED REDACTED	
CO30> Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster CO35> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107 CO39> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address - Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30> Contact Email Address of person identified in data line <030> andy. m. lancaster wsprint.com CO30>	
Contact Telephone Number of person identified in data line <030> 913-762-6107 Contact Telephone Number of person identified in data line <030> andy.m. Iancasterwsprint.com Contact Email Address - Email Address of person identified in data line <030> andy.m. Iancasterwsprint.com Contact Email Address - Email Address of person identified in data line <030> andy.m. Iancasterwsprint.com Contact Email Address - Email Address of person identified in data line <030> andy.m. Iancasterwsprint.com Contact Email Address - Email Address - Email Address of person identified in data line <030> andy.m. Iancasterwsprint.com Contact Email Address - Contact Email Address -	N
Contact Email Address - Email Address of person identified in data line <030> and y.m. lancaster ##sprint.com Cas	
<220> <a> NORS Reference Number Date Time Outage Start Time Outage End Date Time Outage End Time Total Number of Customers Customers Affected (Yes / No) Parvice Outage Affected (Yes / No) Resolution Resolution REDACTED	
NORS Reference Number Outage Start Date Outage End Date Time Outage End Date Time Outage End Date Time Outage End Date Time Outage End Date Total Number of Customers Affected (Yes / No) Resolution REDACTED	
Reference Number Date Time Date Time Date Time Date Time Customers Affected Total Number of Customers Affected (Yes / No) Service Outage Description (Check all that apply) Reference Number Date Time Date Time Customers Affected (Yes / No) Service Outage Description (Check all that apply) Resolution Resolution REDACTED	<h></h>
REDACTED	Preventative Procedures
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The second second	ce Offerings Including Voice Rate Data lection Form	And the second s			l No =3060±09 8 6	OMB Controll	lo (3060±0819)
Street reg				July 2013			
<010>	Study Area Code	409025		 <u> </u>			
<015>	Study Area Name	Virgin Mobile USA LP					
<020>	Program Year	2014					
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster					
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107		#- · · ·			
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy:m.lancaster@sprint.com	*.	 1945 II. (4)			
	A1						
<701>	Residential Local Service Charge Effective Date 1/1/2013				**		
<702>	Single State-wide Residential Local Service Charge						

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate		State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and 1
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	<u> </u>							
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			-	See att	ached worksheet			
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(710) Bro	adband Price Offerings	FCCFFOrm 4818			
Parker 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ection Form	OMB(Control No. 3060-0986/OMB(Control No. 3060-0819			
Data Con		JUNY2013			
<010>	Study Area Code	409025			
<015>	Study Area Name	Virgin Mobile USA LP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107				
<039>	Contact Email Address - Email Address of person identified in data line	<030> andy.m.lancaster@sprint.com			

<711>

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
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	<u> </u>		sheet	*				
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(800) Operating Companies Data Collection Form	FCC Form 481 OMB(Control(No. 3060 0986/OMB(Control(No. 3060 0819) July 2013

<010>	Study Area Code	409025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Langaster
<035>	Contact Telephone Number - Number of person identified in data line <0	J30> 913-762-6107
<039>	Contact Email Address Email Address of person identified in data line <0	030> andy.m.lancaster@sprint.com
<810>	Reporting Carrier Virgin Mobile USA	
<811>	Holding Company Sprint Corporation	
<812>	Operating Company	

	Affiliates		SAC	Doing Business As Company or Brand Designation
	A contract the con	See	ttached worksh	ieet
<u> </u>		25. <u>1</u>	1	
35				

The state of the s	oal Lands Reporting ection Form	FCGIFOrm 481 OMB Control No. 3060 9986 / OMB Control No. 3060 0819 July 2013
<010>	Study Area Code	409025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data line	e <030> andy.m.lancaster@sprint.com
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	Name of Attached Document (.pdf)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	Select (Yes,No, NA)
<922>	Feasibility and sustainability planning;	Professional Contraction of the
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Facilities Sitting Tules Compliance with Environmental Review processes	
<927 <i>></i>		
	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

(1100) No Terrestrial Backhaul Reporting: Data Collection Form: July 2013.								
<010>	Study Area Code	409025						
<015>	Study Area Name	Virgin Mobile USA LP						
<020>	Program Year	2014						
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster						
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107						
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com						
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)							
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)							

Lifeline	rms and Condition for Lifeline Customers	16				bl(No./3060-0819
<010>	Study Area Code	4	409025			
<015>	Study Area Name	,	Virgin Mobile USA LP			
<020>	Program Year		2014			
<030>	Contact Name - Person USAC should contact regarding this data		Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	andy.m.lancaster@sprint.com			
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Al	ame of attached document (.pdf)	T-113-11-11-11		
<1220>	Link to Dublic Wakeito	h	ame of attached document (.pdf)	ic/TermsandCon	ditions.aspx	
\1220>	Link to Public Website	HTTP				
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income					
<1221>	support, carriers must annually report: Information describing the terms and conditions of any voice	/				
<1222>	telephony service plans offered to Lifeline subscribers, Details on the number of minutes provided as part of the plan,	V				
<1223>	Additional charges for toll calls, and rates for each such plan.	/				

(2000) Pr	ice Cap Carrier/Additional Documentation		FCG(Form)481
Service Services	ection Form		*OMB Control No. 3060-0986/OMB Control No. 3060-0819 :=-
and the second second	Rate of Return Carriers affiliated with Price Cap Local Exchange Carriers		July/2013
menoning	nort-officentime-contain of the contained contained to the contained by		
<010>	Study Area Code	109025	
<015>		Virgin Mobile USA LP	
<020>		014	
<030>		ndrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	
			white the little profession is continued to the continued
CHECK ti	ne boxes below to note compliance as a recipient of Incremental Connect Am	erica Phase I support, frozen High Cost support, High Cost support to offset acc	ess charge reductions, and Connect America Phase II
		(e) the information reported on this form and in the documents attached belo	
		•	
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)		and the same
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF, on line 2021,		
	contains the required information pursuant to § 54.313 (e)(3)(ii), as a	recipient	
	of CAF Phase II support shall provide the number, names, and address	ses of	
	community anchor institutions to which began providing access to br	oadband	
	service in the preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	